



# **ON-LINE AND INSTANT RETAILER APPLICATION**



## MICHIGAN LOTTERY RETAILER - APPLICANT INFORMATION -

---

1. The Bureau of State Lottery wishes to advise all applicants for licenses and/or changes of ownership not to invest any money or commit themselves by any binding agreements in the expectation of being issued a license or approval of a change of ownership until officially notified by the Lottery that their application has been approved. **ALL LICENSES ARE FOR INSTANT TICKETS ONLY** unless purchasing a business already selling on-line games.
2. Most applicants with an acceptable credit history and no criminal record that would adversely affect the integrity of the Lottery may be licensed. ***ANY CRIMINAL RECORD MUST BE DISCLOSED ON PERSONAL DATA SHEETS.***
3. A copy of a bill of sale or other proof of ownership must be provided before a license will be issued.
4. An application processing fee of \$150 will be withdrawn from the Retailer's EFT account once a license is issued. This withdrawal will occur after approximately three weeks of sales.
5. Licensed Retailers are required to maintain a separate account in a financial institution that is a member of The Michigan Automated Clearing House Association. The Lottery must be authorized to initiate electronic funds transfers (EFT) to or from the Retailer's designated account for the net weekly settlements due from the sale of instant and/or on-line game tickets. The Retailer shall ensure that "good" funds shall be available in the designated account to cover said transfers on the day of week specified by the Lottery.

"Good" funds are defined as unrestricted funds credited to a Retailer's account that a financial institution will release for payment of an EFT. Unrestricted funds do not include checks placed on hold until they have cleared the maker's account or deposited checks that the maker's financial institution has returned unpaid. Any cash alternative settlement methods (such as line of credit, overdraft protection, a pre-approved loan, or any other arrangements) agreed upon with your bank are the agent's responsibility. If a settlement is not honored by your bank, regardless of the reason, the Lottery will consider it a delinquency.

Applicants should submit a completed Electronic Funds Transfer (EFT) Authorization Card with the application. If this EFT account will not be established until closing of the sale, a deposit slip or void check may be submitted at that time. Lottery products will not be made available to the Retailer until this information is provided.

6. **ON-LINE TERMINALS** - Licensed lottery retailers selling instant game tickets are eligible for consideration for an on-line terminal once their instant game sales level is sufficient to qualify. Each month, all instant only lottery retailers are reviewed to determine which ones have enough instant game sales to consider them for a terminal. During an evaluation, lottery retailers from the entire State of Michigan are listed in descending order of their instant game sales for the three months immediately preceding the monthly evaluation. Those with the highest level of sales are offered a terminal pending a credit and security background check. Any retailer found to be selling their instant tickets at a location other than their licensed location will be placed on probation and not eligible for a terminal. The number of terminals offered each month varies as we replace any that become available due to business closures.

The Retailer will be required to provide (prior to the installation of Lottery equipment) a dedicated circuit with 115 volts, 20 Amp., 60 HZ service with an isolated ground that remains on 24 hours per day. The dedicated circuit must have a 4 outlet box that will accommodate 3 prong, "U" grounded type plugs. The Lottery reserves the right to require a retailer to obtain certification of a dedicated electrical circuit from a qualified electrician. All installation and ongoing costs for this service will be the responsibility of the Retailer. The outlet shall be located within five feet of the terminal. The Retailer shall provide sufficient space for the operation of the equipment.

7. BUSINESS TYPE definitions to be used for completion of application, determination of Personal Data Sheet and signature requirements.
- a. **PROPRIETORSHIP** - a business enterprise doing business under an assumed name, that is owned by one person (not registered with the Michigan Department of Commerce). A Proprietorship may use the owner's Social Security number as a tax identification number or s/he may have a registered Federal Employer Identification Number (FEIN). The owner must complete and sign the contract and submit a Personal Data Sheet.
  - b. **PARTNERSHIP** - a business enterprise doing business under an assumed name that is NOT registered as a Partnership with the Michigan Department of Commerce. Each Partner must sign the contract and Personal Data Sheets must be provided for all partners.
  - c. **LIMITED PARTNERSHIP** - a business enterprise, doing business under an assumed name, that IS registered as a Partnership with the Michigan Department of Commerce. A General Partner must sign the contract and Personal Data Sheets must be provided for all general partners.
  - d. **LIMITED LIABILITY COMPANY** - a business enterprise, doing business under an assumed name, that is registered as an unincorporated association with the Michigan Department of Commerce. Members are required to sign the contract and submit Personal Data Sheets. (Members are defined as persons having ownership interest in a limited liability company.)
  - e. **CORPORATION** - a business enterprise organized as a corporate entity, doing business under an assumed name, that is registered with the Michigan Department of Commerce.

"Closely Held Corporation" means a corporation where a majority (more than 50 percent) of the outstanding voting stock is owned by ten or fewer persons. Any person authorized and empowered to execute contracts and bind the corporation to its terms and obligations may sign the contract. A Personal Data Sheet is required for each owner/shareholder, except that any individual owning less than 10 percent may be listed on a separate sheet of paper and is required only to provide name, Social Security number and percent of ownership.

"Non-Closely Held Corporation" means a corporation where a majority (more than 50 percent) of the outstanding voting stock is owned by more than ten persons. The Principal Operating Officer(s) is/are required to sign the application and submit Personal Data Sheet(s). (A Principal Operating Officer is defined as a person designated to conduct business in the State of Michigan on behalf of the corporation being licensed.)

- f. To properly comply with the reporting requirements for the Internal Revenue Service, the Lottery must change the agent number assigned to you when you change your business structure. The Lottery defines a change in business structure as anytime your Taxpayer Identification Number, Corporate Number or business type (sole proprietor, partnership or corporation) changes.

When your agent number is changed, we must financially close out the old agent number. This will result in all activated books having to be settled and cashed out, regardless of the length of time they have been activated or the percentage of validations that have occurred within each book. Once a book has been activated we are unable to reassign the book, which is why settlement is required.

You will then be assigned a new agent number and all confirmed books will be reassigned to this new number.

8. Please note that the accompanying retailer license application requires that you indicate if your business is in compliance with the Americans with disabilities Act (ADA). If you have any questions about compliance, please contact Dr. Kalmin D. Smith, State ADA Coordinator, at 517-373-7246.

If you have any questions, call the LICENSING SECTION (517) 335-5619.

Send completed documents to: Michigan Lottery  
Licensing Section  
P.O. Box 30023  
Lansing, MI 48909



## MICHIGAN LOTTERY RETAILER INFORMATION

---

1. A person must be 18 or older to buy or sell Lottery tickets.
2. Licensed Lottery Retailers may sell tickets only on the premises indicated in the license. Only instant tickets issued to a specific location can be sold at that location. Retailers may not exchange books of instant tickets with other Retailers or stores.
3. All Lottery Retailers are expected to redeem winning tickets with a value up to and including \$600. Winning tickets must be validated through the validation system(s) for the Retailer to receive credit.
4. Stamp or write your retailer number on the back of all winning instant tickets that you redeem and deface the validation number. Destroy redeemed tickets after balancing.
5. Retailers are expected to make full use of all promotional material provided by the Lottery and to prominently post winning numbers/symbols and jackpot amounts as soon as possible.
6. On-line Retailers are expected to participate in Michigan Lottery signage programs and to display approved sign(s) provided by the Lottery. Signage will only be installed if it does not conflict with local ordinances, chain store/corporate policy guidelines, and/or affect the Retailer's standing in the community of operation. It will be the Retailer's responsibility to determine whether or not these conditions will restrict the Retailer's use of Michigan Lottery signage.
7. Lottery tickets cannot be sold for more than their established price. They can be sold for less than their established price as a special promotion if the Retailer desires. Retailers who sell tickets to other Retailers for resale are in violation of the Lottery Act & Rules.
8. "Good" funds are defined as unrestricted funds credited to a Retailer's account that the financial institution will release for payment of an EFT. Unrestricted funds do not include checks that have not cleared the maker's account.
9. Retailers receive a 6 - 7% commission on each ticket sold and a 2% commission on any prize paid.
10. The Retailer shall exercise due diligence in the operation of any installed equipment and shall immediately notify the Lottery's system operator (Hotline) of any phone line or equipment malfunction. The Retailer shall refrain from attempting to perform any mechanical or electrical maintenance or repairs to the equipment except as instructed. If terminal malfunction is a result of retailer noncompliance with Lottery guidelines or specifications, the retailer may be responsible for repair and/or service charges. The Retailer shall replace ribbons, paper stock, and clear paper jams as required.
11. The Retailer shall be responsible for the physical security of the Lottery equipment. Damage to the equipment or telecommunication lines attributable to the Retailer's negligence will result in an assessment to the Retailer for the cost of equipment repair or replacement.
12. If you plan to sell your business and the buyer wants to continue selling Lottery tickets, a change of ownership must be approved by the Lottery. The buyer should submit an application approximately 45 days prior to closing. Contact the Licensing Section for details (517) 335-5619.



## MICHIGAN LOTTERY RETAILER - PERFORMANCE REQUIREMENTS -

---

1. The Retailer shall immediately notify the Licensing Section of any lapse in on-line terminal operation that will exceed 48 hours in duration. The Retailer's equipment may be removed and/or the license may be revoked if the Retailer fails to promptly notify the Lottery of any lapse in an on-line terminal operation.
2. The Retailer's license shall be revoked if the Retailer has an unapproved lapse in operation that exceeds 30 calendar days.
3. The Retailer shall pay the fees set by the Lottery; for communication equipment installation (telephone line), for failure to promptly settle for any game, and for failure to meet minimum sales performance requirements. The following fees are established in accordance with Lottery Rules and may be modified by the Lottery at any time. Retailers will be provided advance written notice of any fee changes.
  - a. Communication Equipment (telephone line) Fee - \$420.10 This fee is for the installation of telecommunication service for an on-line Lottery terminal.
  - b. Delinquency Fee - \$200 This fee may be assessed by the Lottery each time a Retailer is delinquent.
  - c. Terminal Minimum Sales Performance Program - All retailers with an on-line terminal are subject to the terminal minimum sales performance fee. Weekly sales must average \$500 per week.
    - 1) The program is based on calendar quarters starting July through September 2006.
    - 2) At the end of each quarter, your weekly sales for that quarter will be averaged. If your combined Lottery sales (all products sold at your location) fall below a weekly average of \$500 for the quarter and below a weekly average of \$500 for the prior 52 weeks, you will be charged \$20 per week for every week of the following quarter.
    - 3) A letter will be mailed to you the first week the fee is assessed.
    - 4) The \$20 fee will be included as an "adjustment" on your Weekly Invoice Report and will be automatically included with your weekly settlement.
    - 5) Retailers with more than one lottery terminal must maintain a combined minimum weekly sales average of \$500 per terminal. This also applies to self-service terminals.
    - 6) Terminals will not be evaluated for the first eight weeks of sales.
    - 7) The program applies to retailers in temporary closed status including seasonal locations, replacing the Lottery's inactive fee program. Locations in a temporary closed status are required to keep an active EFT account with the proper funds available to ensure the Lottery receives payment.
    - 8) Failure to pay the minimum sales fee will result in the removal of the terminal from the retailer's place of business.

- OVER -

4. Retailers must not be delinquent in settling accounts with the Lottery.
  - a. A Retailer's selling privileges may be suspended upon determination that the Retailer is delinquent for any settlement.
  - b. Retailers are expected to promptly "make good" a delinquency by remitting a cashier's or certified check to the Lottery for the full amount of the delinquency plus any delinquency fee. A fee may be assessed for each delinquency in accordance with the fee schedule currently in effect.
  - c. A Retailer who fails to promptly "make good" a delinquency shall be subject to license revocation.
  - d. A Retailer who exceeds the established number of delinquencies within six consecutive months shall be subject to license revocation.
  - e. Specific definitions of terms:
    - (1) Delinquent Retailer: A Retailer who fails to have sufficient good, available funds in the financial institution account at the time the Lottery attempts to electronically withdraw the Retailer's settlement, or who fails to settle an invoice issued by the due date of the invoice, or who issues a non-sufficient funds check to the Lottery resulting in the financial institution's refusal of the Electronic Funds Transfer (EFT) for payment.
    - (2) Good, Available Funds: Unrestricted funds credited to a Retailer's account that a financial institution will release for payment of an EFT. Unrestricted funds do not include checks placed on hold by the financial institution until they have cleared the maker's account or deposited checks that the maker's financial institution has returned unpaid.
    - (3) Waiver of Delinquency: A Retailer may not be considered delinquent if:
      - (a) An EFT return occurs the first week that an EFT is attempted against a newly established EFT account; or
      - (b) The Retailer has notified the Lottery of a robbery resulting in the loss of funds and has provided a copy of the police report; or
      - (c) An EFT is returned because of a verifiable financial institution error. Documentation shall include:
        - 1) Letter from a financial institution officer.
        - 2) A deposit ticket (both sides) showing cash was deposited into the proper account.
        - 3) Monthly statement showing daily balances.
5. Failure to meet the performance requirements or the terms and conditions of the Contract shall result in disciplinary action depending on the nature and severity of the violation. When the severity of a violation warrants equipment removal and/or license revocation, the Retailer may request a conference with the Commissioner or the Commissioner's designee. At this informal conference, the alleged violation shall be reviewed with the Retailer. The Retailer shall have the opportunity to refute the alleged violation or to explain the reasons for the violation. The Retailer will be notified in writing of the Commissioner's decision.



## MICHIGAN LOTTERY RETAILER - GENERAL GVT INFORMATION -

---

All licenses are for instant tickets only unless purchasing a business already selling on-line games. The following information explains the equipment requirements for selling and validating instant tickets:

### **GTECH Corporation:**

GTECH corporation is the supplier of the Instant Ticket Validation network (GVT). GTECH has also provided and operated the existing on-line network for the Michigan State Lottery since 1988 and will install and maintain the GVT system and scanner equipment. GTECH will also provide the necessary training and scanner reference material at the time of installation.

### **GTECH Validation Terminal (GVT):**

The GVT (scanner) is approximately 10 inches wide, 10 inches long, and 4 inches deep. However, it will require approximately one square foot of space for placement. The GVT is equipped with a screen where all messages, instructions and transactions will be displayed.

### **Printer:**

A printer will be installed near the GVT to provide retailers with printed validation receipts, printed reports, etc. The printer is approximately 9 inches long, 6 inches wide, and 4 inches high.

### **Communications:**

The GVT will communicate with the lottery central computer system through your existing telephone line by the use of a "dial-up" method. This means that periodically the information stored in the GVT will be transmitted to the central system automatically through your telephone line. Coin operated phone lines and party lines are not allowed. The GVT will determine on its own when it needs to dial into the central system to update accounting files. Retailers will not incur any telephone charges for the "dial-up" call since the access is through a toll free 800 number.

### **Electrical Requirements:**

The GVT uses minimal electricity and operates from a standard 110 volt power outlet that will need to be located no more than 6 feet from the GVT location.

### **GVT and Printer Placement:**

The GVT and printer may be placed individually on a counter top or mounted to a wall.

For your convenience, optimum placement of the GVT would be in an area easily accessible for redeeming tickets and report balancing. Please keep in mind that you will need to provide an electrical outlet within 6 feet of this location. To ensure GVT reliability, extension cords are NOT permitted.

### **Hours of Operation:**

This system will operate from 6:00 AM to 2:00 AM - 7 days a week.

## RETAILER CONTRACT / APPLICATION

LOTTERY USE ONLY		
APPL. #	RET. #	
CITY	COUNTY	CHAIN

Business Name or DBA		Number and Street		City	County
Zip Code	Business Number ( )	Fax Number ( )	Date Business Was Purchased by You	Current Lottery Retailer Number of This Location (if applicable)	

IS THIS BUSINESS IN COMPLIANCE WITH THE REQUIREMENTS OF THE AMERICAN WITH DISABILITIES ACT? ☐ YES ☐ NO

MAILING ADDRESS IF DIFFERENT FROM BUSINESS ADDRESS:

Name	Street Address or P.O. Box	City	ZIP Code
------	----------------------------	------	----------

NATURE OF APPLICATION

☐ New License    ☐ Change of Ownership    ☐ Add Partner    ☐ Drop Partner    ☐ Stock Transfer  
☐ Change in Business Type    ☐ Other: \_\_\_\_\_

INDICATE BUSINESS TYPE (Refer to Applicant Information Sheet):

☐ Sole Proprietorship    ☐ Limited Partnership    ☐ Limited Liability Company  
☐ Partnership    ☐ Corporation

FED ID # (FEIN)

ALL BUSINESSES OTHER THAN SOLE PROPRIETORSHIP MUST PROVIDE:

Legal Entity Name

Headquarters Address

INDICATE WHICH LOTTERY PRODUCT(S) YOU WISH TO CARRY (Refer to the Applicant Information Sheets for qualifications):

☐ Instant Scratch-off Tickets    ☐ Online Games    **-OR-**    ☐ Pull Tab Tickets    ☐ Club Keno

CHECK THE BOX SHOWING YOUR PRINCIPAL BUSINESS

<input type="checkbox"/> Supermarket (1)	<input type="checkbox"/> Liquor/Party Store (7)	<input type="checkbox"/> Kiosk (13)
<input type="checkbox"/> Convenience Store (2)	<input type="checkbox"/> Mass Merchandiser (8)	<input type="checkbox"/> Seasonal Account (14)
<input type="checkbox"/> Gas/Convenience Store (3)	<input type="checkbox"/> Mass Grocery Merchandiser (9)	<input type="checkbox"/> Bowling (15)
<input type="checkbox"/> Restaurant (4)	<input type="checkbox"/> Drug Store (10)	<input type="checkbox"/> Golf (16)
<input type="checkbox"/> Bar/Restaurant (5)	<input type="checkbox"/> Recreation (11)	<input type="checkbox"/> Race Track (17)
<input type="checkbox"/> Bar (6)	<input type="checkbox"/> Specialty Shop (12)	<input type="checkbox"/> Adult Entertainment (18)
		<input type="checkbox"/> Other (99) (Explain) _____

WRITE THE APPLICABLE MICHIGAN LIQUOR CONTROL LICENSE(S) ISSUED TO THE APPLICANT FOR THIS BUSINESS, AT THIS LOCATION (if pending receipt, write pending):

SDM (11) <input type="text"/>	SDD (15) <input type="text"/>	Class C (01) <input type="text"/>
Tavern (03) <input type="text"/>	Other <input type="text"/>	Explain: <input type="text"/>

ENTER YOUR WEEKLY AVERAGES:

Alcohol Sales (if applicable) <input type="text"/>	Food Sales (if applicable) <input type="text"/>	Approximate Customer Count <input type="text"/>
--	---	---

ENTER YOUR APPROXIMATE NUMBER OF:

Employees <input type="text"/>	Cash Registers/ Checkouts <input type="text"/>	Parking Spaces (if applicable) <input type="text"/>
--------------------------------	--	---

ENTER THE BUSINESS'S APPROXIMATE:

Square Footage <input type="text"/>	Seating Capacity (if applicable) <input type="text"/>
-------------------------------------	---

ENTER THE HOURS OF OPERATION:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Open							
Close							

THIS CONTRACT between the Michigan Bureau of State Lottery, hereinafter referred to as the "Lottery", and

\_\_\_\_\_, dba \_\_\_\_\_, INDIVIDUAL(S) OR CORPORATION DBA (Doing Business As)

hereinafter referred to as the "Retailer", shall take effect on the day the Lottery license is issued and shall continue until terminated by written notice by either party or until a mutually agreed date of termination.

THE PARTIES agree as follows:

1. The Retailer agrees to provide services for the Lottery for the sale of products authorized by the Lottery in conformity with Act No. 239 of the Public Acts of 1972, as amended. The Retailer agrees to abide by all Lottery Rules, directives, performance requirements and official written communications issued by the Lottery.
2. The Retailer's Lottery license and the rights and obligations established by this Contract are NOT assignable or transferable. The Lottery reserves the right to disapprove or qualify approval of an application for a change of ownership. The Lottery reserves the right to remove any Lottery equipment if the change of ownership is not approved by the Lottery.
3. The Retailer shall obtain written Lottery approval prior to any change of location of the Retailer's business premises (e.g., the Retailer moves from one business location/address to another location/address). For any change in business location the Retailer shall pay any and all costs associated with the relocation (e.g., communication system connections, equipment connections, etc.).
4. The Retailer shall provide written notice to the Lottery of any proposed sale, dissolution or termination of the Retailer's business and/or any change in ownership of the Retailer's business. All changes are subject to the Lottery's approval and may be denied if:
  - a. The proposed new owner does not satisfy the Lottery's requirements for past compliance, integrity, financial responsibility, or any other criteria for initial licensure;
  - b. The Retailer has not settled all outstanding accounts with the Lottery.
5. The Lottery shall pay the Retailer the prevailing commission rate for all valid sales and for all valid prize payments.
6. The Lottery shall provide equipment, routine equipment maintenance, and supplies related to operation of the installed equipment to the Retailer at no cost, except as may be assessed for installation, repair or replacement.
7. Each of the Undersigned persons represents and warrants that s/he has reviewed and fully understands the Contract and that:
  - a. S/he is a person authorized to execute this Contract and bind the Retailer to its terms and obligations.
  - b. S/he, individually and together, and for her or his personal estate, guarantees to the Lottery the Retailer's faithful performance of the Contract. Without limiting the generality of the foregoing guarantee and merely by way of example, this includes:
    - 1) safe custody and prompt return to the Lottery or its designated representative, when required, of any equipment, tickets, materials and supplies owned and/or to be owned by the Lottery.
    - 2) prompt and timely remittance to the Lottery of all funds due.
  - c. TERMINATION OF THE CONTRACT BY EITHER PARTY SHALL NOT EXTINGUISH ANY OBLIGATION WHICH AROSE WHILE THIS CONTRACT WAS IN EFFECT.

Each owner/shareholder signs below (add sheet, if needed).

TYPE OR PRINT NAME OF INDIVIDUAL	SIGNATURE	DATE
TYPE OR PRINT CORPORATE TITLE	PERCENT OF STOCK	
TYPE OR PRINT NAME OF INDIVIDUAL	SIGNATURE	DATE
TYPE OR PRINT CORPORATE TITLE	PERCENT OF STOCK	
TYPE OR PRINT NAME OF INDIVIDUAL	SIGNATURE	DATE
TYPE OR PRINT CORPORATE TITLE	PERCENT OF STOCK	
TYPE OR PRINT NAME OF INDIVIDUAL	SIGNATURE	DATE
TYPE OR PRINT CORPORATE TITLE	PERCENT OF STOCK	

A Personal Data Sheet is required for person(s) signing above and additional owner(s)/shareholders as described on the Applicant Information sheet.

ENTER THE NUMBER OF PERSONAL DATA SHEETS SUBMITTED \_\_\_\_\_.



MICHIGAN LOTTERY  
LICENSING SECTION  
101 E. HILLSDALE, BOX 30023  
LANSING, MICHIGAN 48909  
www.michigan.gov

## PERSONAL DATA SHEET

Business Name (dba) \_\_\_\_\_

EACH OWNER, PARTNER, PRINCIPAL SHAREHOLDER, AND/OR CORPORATE OFFICER OF THIS BUSINESS MUST COMPLETE AND SIGN A PERSONAL DATA SHEET. (USE AS MANY ADDITIONAL SHEETS AS NECESSARY.)

NAME (LAST, FIRST, M.I.)		MAIDEN NAME/ALIAS		
SOCIAL SECURITY NO. *	DATE OF BIRTH	SEX	DRIVER'S LICENSE NO.	
HOME ADDRESS (NO., STREET)		CITY	STATE ZIP	
HOME PHONE NUMBER ( )	CELL PHONE NUMBER ( )	EMAIL ADDRESS	TITLE	% OWNERSHIP

\* PROTECTED BY FEDERAL PRIVACY LAWS AND STATE CONFIDENTIALITY REQUIREMENT

1. Full name of spouse \_\_\_\_\_

2. I or my spouse previously held, or now hold interest in the following licenses for sale of Lottery products as sole licensee, partner or corporation: (attach additional sheets if necessary)

RETAILER NUMBER	STORE NAME	ADDRESS
-----------------	------------	---------

3. If you are not a U.S. citizen - are you a registered alien? ☐ YES ☐ NO or do you have a Visa? ☐ YES ☐ NO

4. Have you ever legally changed your name? ☐ YES ☐ NO

From \_\_\_\_\_ to \_\_\_\_\_

5. Have you ever been known by any other names? ☐ YES ☐ NO

Give names \_\_\_\_\_

6. List all misdemeanor or felony convictions, excluding only minor traffic offenses (include alcohol related convictions): (attach additional sheets if necessary)

DATE	PLACE	CHARGE	DISPOSITION
DATE	PLACE	CHARGE	DISPOSITION

7. Has this business or have you individually ever been investigated or penalized by a state or federal agency? (For example: violations involving liquor, food stamps, tobacco, lottery, etc.)

☐ YES ☐ NO If yes, attach explanation that includes the date, location, charge, disposition, and the government agency involved.

8. Has this business or have you individually ever failed to pay any taxes, fees, or other obligations owed to the U.S. government, a state government, or any local governmental subdivisions?

☐ YES ☐ NO If yes, attach explanation that includes date of default, type of tax or fee in default and date cleared.

9. Have you ever had any involvement in a personal or business bankruptcy or business in receivership?

☐ YES ☐ NO If yes, attach explanation.

10. Are there currently any lawsuits pending against you or your business?

☐ YES ☐ NO If yes, attach reason for suit, plaintiff, amount(s) of uninsured potential damages.

**WARNING:** Rule 432.4 provides that the Retailer's license may be immediately suspended or revoked or its renewal rejected if the application for a license contains false or misleading information.

I HAVE EXAMINED THIS INFORMATION AND VERIFY IT IS COMPLETE AND CONTAINS NO MISREPRESENTATIONS OR FALSE STATEMENTS. I AUTHORIZE THE RELEASE OF ALL INFORMATION REGARDING MY PERSONAL/BUSINESS CREDIT AND CRIMINAL HISTORY TO THE MICHIGAN LOTTERY. I UNDERSTAND IT IS MY RESPONSIBILITY TO REPORT ANY CHANGES IN THE ABOVE INFORMATION. I ACCEPT THAT ANY VIOLATION OF THE LOTTERY ACT, RULES, CONTRACT, DIRECTIVES, INSTRUCTIONS, OR COMMUNICATIONS MAY BE CAUSE FOR REVOCATION OF ANY LOTTERY LICENSE.

SIGNATURE	DATE
-----------	------

COMPLETION: Required.  
PENALTY: Denial of application.



MICHIGAN LOTTERY  
LICENSING SECTION  
101 E. HILLSDALE, BOX 30023  
LANSING, MICHIGAN 48909  
www.michigan.gov

## PERSONAL DATA SHEET

Business Name (dba) \_\_\_\_\_

EACH OWNER, PARTNER, PRINCIPAL SHAREHOLDER, AND/OR CORPORATE OFFICER OF THIS BUSINESS MUST COMPLETE AND SIGN A PERSONAL DATA SHEET. (USE AS MANY ADDITIONAL SHEETS AS NECESSARY.)

NAME (LAST, FIRST, M.I.)		MAIDEN NAME/ALIAS		
SOCIAL SECURITY NO. *	DATE OF BIRTH	SEX	DRIVER'S LICENSE NO.	
HOME ADDRESS (NO., STREET)		CITY	STATE	ZIP
HOME PHONE NUMBER ( )	CELL PHONE NUMBER ( )	EMAIL ADDRESS	TITLE	% OWNERSHIP

\* PROTECTED BY FEDERAL PRIVACY LAWS AND STATE CONFIDENTIALITY REQUIREMENT

1. Full name of spouse \_\_\_\_\_

2. I or my spouse previously held, or now hold interest in the following licenses for sale of Lottery products as sole licensee, partner or corporation: (attach additional sheets if necessary)

RETAILER NUMBER	STORE NAME	ADDRESS
-----------------	------------	---------

3. If you are not a U.S. citizen - are you a registered alien? ☐ YES ☐ NO or do you have a Visa? ☐ YES ☐ NO

4. Have you ever legally changed your name? ☐ YES ☐ NO

From \_\_\_\_\_ to \_\_\_\_\_

5. Have you ever been known by any other names? ☐ YES ☐ NO

Give names \_\_\_\_\_

6. List all misdemeanor or felony convictions, excluding only minor traffic offenses (include alcohol related convictions): (attach additional sheets if necessary)

DATE	PLACE	CHARGE	DISPOSITION
DATE	PLACE	CHARGE	DISPOSITION

7. Has this business or have you individually ever been investigated or penalized by a state or federal agency? (For example: violations involving liquor, food stamps, tobacco, lottery, etc.)

☐ YES ☐ NO If yes, attach explanation that includes the date, location, charge, disposition, and the government agency involved.

8. Has this business or have you individually ever failed to pay any taxes, fees, or other obligations owed to the U.S. government, a state government, or any local governmental subdivisions?

☐ YES ☐ NO If yes, attach explanation that includes date of default, type of tax or fee in default and date cleared.

9. Have you ever had any involvement in a personal or business bankruptcy or business in receivership?

☐ YES ☐ NO If yes, attach explanation.

10. Are there currently any lawsuits pending against you or your business?

☐ YES ☐ NO If yes, attach reason for suit, plaintiff, amount(s) of uninsured potential damages.

**WARNING:** Rule 432.4 provides that the Retailer's license may be immediately suspended or revoked or its renewal rejected if the application for a license contains false or misleading information.

I HAVE EXAMINED THIS INFORMATION AND VERIFY IT IS COMPLETE AND CONTAINS NO MISREPRESENTATIONS OR FALSE STATEMENTS. I AUTHORIZE THE RELEASE OF ALL INFORMATION REGARDING MY PERSONAL/BUSINESS CREDIT AND CRIMINAL HISTORY TO THE MICHIGAN LOTTERY. I UNDERSTAND IT IS MY RESPONSIBILITY TO REPORT ANY CHANGES IN THE ABOVE INFORMATION. I ACCEPT THAT ANY VIOLATION OF THE LOTTERY ACT, RULES, CONTRACT, DIRECTIVES, INSTRUCTIONS, OR COMMUNICATIONS MAY BE CAUSE FOR REVOCATION OF ANY LOTTERY LICENSE.

SIGNATURE	DATE
-----------	------

COMPLETION: Required.  
PENALTY: Denial of application.

## ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION

I authorize the Michigan Lottery to make variable withdrawals or deposits from or into the account identified below, and authorize the financial institution to charge such withdrawals or deposits to my listed account. The amount of the withdrawals or deposits will be equal to the amount shown on my invoice for gaming transactions. Adjusting entries are also authorized.

It is agreed that these withdrawals, deposits and adjustments may be made electronically and under the rules of the Michigan Automated Clearing House Association. I understand that this authorization will remain in effect until a termination or change of account is confirmed by the Michigan Lottery.

**PLEASE ATTACH VOID CHECK OR DEPOSIT TICKET TO THIS AUTHORIZATION**

Contact Person	Contact Person's Telephone Number (            )	Store or Owner Fax # (            )
Business Name as Shown on Lottery License (Please Print)	Signature of Authorizing Party (Owner, Partner, Other)	Date
Address: Street, P.O. Box City State Zip Code		
Retailer Number	Bank Name Bank Telephone Number (            )	<input type="checkbox"/> New Agent <input type="checkbox"/> Account Change

**Lottery Use Only**

Type of Account <input type="checkbox"/> Checking (02) <input type="checkbox"/> Savings (03)	DFI's Routing and Transit Number <div></div>	Account Number <div></div>
--	---	-------------------------------

**LOTTERY USE ONLY**

**COMPLETION:** Mandatory.  
**PENALTY:** Loss of license.

This form is issued under the authority of Act 239, 1972 as amended.

BSL-A-667(R2/05)

**Request for Taxpayer  
Identification Number and Certification**Give form to the  
requester. Do not  
send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/ Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶ .....	<input type="checkbox"/> Exempt from backup withholding
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 2. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on back.

**Note:** If the account is in more than one name, see the chart on back for guidelines on whose number to enter.

Social security number								
			+			+		
or								
Employee identification number								
		+						

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), **and**
- I am not subject to backup withholding because: **(a)** I am exempt from backup withholding, or **(b)** I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or **(c)** the IRS has notified me that I am no longer subject to backup withholding, **and**
- I am a U.S. person (including a U.S. resident alien).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments, other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------

**Purpose of Form**

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

**U.S. person.** Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note:** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sectionn 301.7701-6(a) and 7(a) for additional information.

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are

a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Forms W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person do not use Form W-9. Instead, use the appropriate Form W-8 (see **Pub. 515**, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Specific Instructions****Name**

If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your social security card on the "Name" line. You may enter your business trade, or "doing business as (DBA)" name on the "Business name" line.

**Limited liability company (LLC).** If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line. Check the appropriate box for your filing status (sole proprietor, corporation, etc.), then check the box for "Other" and enter "LLC" in the space provided.

**Other entities.** Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

**Note:** You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

## What Name and Number to Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup> The minor <sup>2</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The grantor-trustee <sup>1</sup>
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship or single-owner LLC	The owner <sup>3</sup>
For this type of account:	Give name and EIN of:
6. Sole proprietorship or single-owner LLC	The owner <sup>3</sup>
7. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name, and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules regarding partnerships* on Page 1.

**Note:** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

## Part I

### Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see **How to get a TIN** below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner **LLC** that is disregarded as an entity separate from its owner (see **Limited liability company (LLC)** on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's EIN.

**Note:** See the chart on for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form on-line at [www.socialsecurity.gov](http://www.socialsecurity.gov). You may also get this form by calling 1-800-772-1213. Use form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer ID numbers under Related Topics. You can get forms W-7 and SS-4 from the IRS by visiting [www.irs.gov](http://www.irs.gov) or calling 1-800-TAX-FORM (1-800-829-3676).

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments (after December 31, 2002). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester, or
2. You do not certify your TIN when required (see the Part II instructions for details), or
3. The IRS tells the requester that you furnished an incorrect TIN, or
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate **Instructions for the Requester of Form W-9**. Also see *Special rules regarding partnerships* on page 1.

## Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.



## MICHIGAN LOTTERY APPLICANT CHECKLIST

Your completed application must contain the following (an incomplete application can result in delay):

☐ **Retailer Contract/Application**

☐ **SDM License Number** (beer & wine license if applicable)

☐ **SDD License Number** (liquor license if applicable)

☐ **Personal Data Sheet** (one data sheet for each owner/shareholder)

☐ **Bill of Sale or Proof of Ownership** (property tax statement, lease, rental, or land contract, etc.)

☐ **EFT Authorization Form** (include a deposit slip or voided check)

☐ **W-9 Form**

☐ **Cash Bond** (if required)

Make sure all forms are signed and dated. Applicants need to remember that licenses are for INSTANT TICKETS ONLY unless purchasing a business already selling on-line games. A license fee of \$150.00 will be withdrawn from your account after approximately three weeks of sales.

All forms and information can be faxed to the Lottery's Licensing Section at (517) 241-0645 or mailed to the following address:

Michigan Lottery  
Attn: Licensing Section  
P.O. Box 30023  
Lansing, MI 48909

Thank you for your interest in the Michigan Lottery.

Licensing Section  
(517) 335-5619  
lotterylicensing@michigan.gov